	Form 2 Dago 4 2012 Social Socurity Nu	ımhori					
	Form 2, Page 6 – 2013 Social Security Nu Schedule III – Montana		Oductions				
	Enter your itemized deductions					nn A (for single, eparate, or head	Column B (for spouse when filing separately
	File Schedule III with yo					household)	using filing status 3a)
1	Medical and dental expenses	1	00	00			
2	Enter the amount from Form 2, line 41	2	00	0.0			
3	Multiply line 2 by 10% (0.10). But if you were born before January 2, 1949, multiply line 2 by 7.5%						
	(0.075) instead (see instructions on page 23)		00	0.0			
	Subtract line 3 from line 1 and enter the result here, but not less than zero. This is your deductible medical and dental expense subject to a percentage of Montana Adjusted Gross Income					00	00
	·	ledical insurance premiums not deducted elsewhere on your return				0.0	0.0
6	ong-term care insurance premiums not deducted elsewhere on your return				6	0.0	00
	nplete lines 7a through 7d reporting your total federal in es paid on lines 7a through 7d.	ncome tax pa	lyments made in 2013	B before completing li	ne 7e. You ca	annot deduct you	ır self-employment
7a	Federal income tax withheld in 2013	7a	00	0.0			
7b	Federal estimated tax payments paid in 2013	7b	00	0.0			
7с	2012 federal income taxes paid in 2013	7c	00	0.0			
7d	Other back year federal income taxes paid in 2013. Include federal Form 1040 or 1040A	7d	00	00			
7e	Add lines 7a through 7d and enter the result here, but		an \$5.000 if you are fil	ing single, head			
	of household, or married filing separately; or \$10,000 federal income tax deduction	if filing a join	t return with your spou	use. This is your	7e	00	00
8	General state and local sales taxes paid in 2013 (see	instructions of	on page 25)		8	0.0	00
	Local income taxes paid in 2013 (see instructions on page 25)				9	0.0	0.0
	Real estate taxes paid in 2013				10	0.0	00
	Personal property taxes paid in 2013 (see instructions on page 25)				11	0.0	00
	Other deductible taxes paid in 2013. List type and amo						
					12	0.0	00
13	Home mortgage interest and points. If paid to the pers	son from who	m you bought the hou	use, provide their			
	name, social security number, and address.		, ,	7.1			
	·				13	0.0	00
14	Qualified mortgage insurance premiums (see instructions on page 25)				14	0.0	0.0
15	Investment interest. Include federal Form 4952				15	0.0	00
16	Charitable contributions made by cash or check during 2013				16	0.0	00
17	Charitable contributions made by other than cash or check during 2013				17	0.0	0.0
	Charitable contribution carryover from the prior year				18	0.0	0.0
19	Child and dependent care expenses. Include Montana Form 2441-M				19	0.0	0.0
	Casualty or theft loss(es). Include federal Form 4684				20	0.0	00
	Unreimbursed employee business expenses. Include federal Form 2106 or 2106-EZ	21	00	00			· .
22	Other expenses. List type and amount:						
		22	00	0.0			
23	Add lines 21 and 22	23	0.0	0.0			
24	Enter the amount from Form 2, line 41	24	0.0	0.0			
	Multiply line 24 by 2% (0.02)		00	0.0			
	Subtract line 25 from line 23 and enter the result here,		than zero		26	0.0	00
27	7 Political contributions (limited to \$100 per taxpayer)				27	0.0	00
	Other miscellaneous deductions not subject to 2% of I						
	·		· ·		28	0.0	00
29	Gambling losses allowed under federal law				29	0.0	00
	Is the amount on Form 2, line 41 more than \$300,000 \$250,000 if filing single or \$150,000 if married filing se Worksheet VI-IDL. Otherwise, add lines 4 through 6, 7	if filing jointly eparately? If y	,, \$275,000 if filing heaves, mark this box	ad of household, and complete			
					30	0.0	0.0

